



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: DELUCA ET AL. Examiner: Ly, A.
Serial No.: 10/027,081 Group Art Unit: 2172
Filed: December 21, 2001 Docket No.: RA 5428
(USYS.032PA)
Title: TOOL SUPPORTING SYSTEM LOG FILE REPORTING

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence and the papers, as described hereinabove, are being deposited in the United States Postal Service, as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on July 7, 2004.

By: Tracey M. Dotter
Tracey M. Dotter

AMENDMENT AND RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

JUL 19 2004

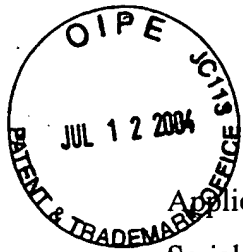
Technology Center 2100

Dear Sir:

In response to the Office Action dated April 28, 2004, please consider the amendments and remarks that follow. Reconsideration and allowance of the application are respectfully requested.

07/14/2004 WABDELRI 00000133 500996 10027081

01 FC:1202 72.00 DA
02 FC:1201 86.00 DA



PATENT APPLICATION

2172
41

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: DELUCA ET AL. Examiner: Ly, A.
Serial No.: 10/027,081 Group Art Unit: 2172
Filed: December 21, 2001 Docket No.: RA-5428
(USYS.032PA)

Title: TOOL SUPPORTING SYSTEM LOG FILE REPORTING

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence and the papers, as described hereinabove, are being deposited in the United States Postal Service, as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on July 7, 2004.

By: Tracey M. Dotter
Tracey M. Dotter

TRANSMITTAL

RECEIVED

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

JUL 19 2004

Technology Center 2100

Sir:

We are submitting herewith the following:

- ☒ Office Action Response, pages 1-12.
- ☒ Transmittal Sheet
- ☒ Postcard
- ☒ Please charge Deposit Account 50-0996 (RA-5428) in the amount of \$158.00, to include \$72.00 for 4 additional total claims and \$86.00 for 1 additional independent claim.

Authorization is hereby given to charge any additional fees or credit any overpayments that may be deemed necessary to Deposit Account No. 50-0996 (USYS.032PA).

Respectfully submitted,

Crawford Maunu PLLC
1270 Northland Drive, Suite 390
St. Paul, Minnesota 55120
651-686-6633

Date: July 7, 2004

By: LeRoy D. Maunu
LeRoy D. Maunu
Reg. No. 35,274